

APPLICATION FOR SCHOLARSHIP

Southern Illinois District LWML

Return to: email to danmicroth@charter.net

or mail to Mickey Roth 110 Foxbrush Dr. Belleville, IL 62221

All applicants must complete this questionnaire as accurately as possible.

Please type or print using black ink.

For which scholarship are you applying?

_____ Student Assistants (Deaconess, Teacher, Director of Christian Education, Preseminary) _____ Seminary Student Scholarship (Pastors)

Applicant's Name _____ Age _____

Home address _____ Phone _____

_____ Email _____

College address _____

Single _____ Married _____ Spouse's name _____

Do you have children? _____ Ages of children _____

Home Church _____ Pastor's name _____

Church address _____ Church Phone _____

Church Activities _____

New Applicant _____ Re-applicant _____ Date of Application _____

Application for scholarship beginning _____, 20____ and ending _____, 20____
(month) (year) (month) (year)

at _____ college/seminary at _____
(name) (select one) (city, state, zip)

Career goal _____ degree being pursued _____ Target date _____

(Pastor, Deaconess, Teacher, Director of Christian Education, Preseminary)

In what class will you be enrolled during the term of this scholarship (1st yr., 2nd yr, etc.) _____

_____ I am **presently enrolled** _____ I am **officially accepted**

Are you presently employed in full time church ministry? _____

What position? _____

Previous Schooling

College/School _____ Degree Received _____ Date Received _____

Address _____ Grade Pt. _____

Present Schooling

College _____ Degree Expected _____ Date Expected _____

Address _____ Grade Pt. _____

Financial Information

Are you currently employed Full-time? _____ Part time? _____ Yearly salary? _____

Do you have summer employment? Approximate summer wages \$ _____

Is your spouse in school? _____ What year? _____

How is your spouse's schooling financed? _____

Is your spouse working? _____ Spouse's yearly salary? \$ _____

Do you have any savings? _____ Amount saved \$ _____

Approximate yearly financial support from Parents? \$ _____ Home congregation?
\$ _____

College? \$ _____ Grants and Loans? \$ _____

Scholarships (list and give amounts) \$ _____

Others (list and give amounts)? \$ _____

Total debt for your education up to this time? \$ _____

Total anticipated costs for the school year – Include tuition, room, board, books, etc.
\$ _____

**All applications must be postmarked by May 1, 2010 to be considered
for a 2010-2011 scholarship grant.**

If the committee does not have all of the above applicable information, your application will not be considered.

Please return this form to the Southern Illinois District LWML VP for Gospel Outreach:

Mickey Roth

110 Foxbrush Dr. or email to: danmicroth@charter.net

Belleville, IL 62221

You will be notified by June 30th if you will or will not receive a scholarship.

SERVE THE LORD WITH GLADNESS

Form revised as of January 2010